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01 FC:1501 02 FC:1504	FC:1504 300-00 UP			<u> </u>	8-11-04	(Date)
03 FC APPLICATION NO.	FILING DATE	FIRST NAMED		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/974,748	10/10/2001	Bruce M. Bina		1. Bina	2376.2018-000	7043
APPLN. TYPE	SMALL ENTITY	ISSUE F		EMENT IN A MULTI-CHANI PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	<u> </u>					
nonprovisional	NO 	\$1400		\$300 CLASS-SUBCLASS	\$1700]	08/17/2006
		2616			J	
			,	370-286000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Tellabs Ope	rations, Inc.		Naperville, Illinois 60563			
Please check the appropriate	e assignee category or category	ries (will not be pr	rinted on the pa	atent): Individual X C	orporation or other private gr	oup entity Government
4a. The following fee(s) are enclosed: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies 15			Sb. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Charge any deficiency The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-0380 (enclose an extra copy of this form).			
5. Change in Entity Status	(from status indicated above		Deposit A	08-0380	(enclose an ext	ra copy of this form).
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.		ant is no longer claiming SMA		
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issurublication Fee (if required) vords of the United States Pate	ue Fee and Publicate will not be accepted ent and Trademark	tion Fee (if any d from anyone Office.	y) or to re-apply any previousl other than the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in
Authorized Signature	Mark B Co	lomo		Date	8/11/06	
Typed or printed name _	Mark B. Solor	non		Registration 1	No. <u>44,348</u>	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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